STATE OF KANSAS

Kansas Department of Health and Environment
Division of Health Care Finance

Notice of Hearing on Proposed Administrative Regulations

A public hearing will be conducted at 3:00 p.m. on Monday, June 23, 2014 in the Landon State Office Building, Room 900-N, 900 S.W. Jackson Street, Topeka, Kansas 66612-1220, to consider the adoption of amended changes to existing rules and regulations on a permanent basis effective 15 days after publication in the Kansas Register. Chapter 187, 2005 Session Laws of Kansas transferred specific powers, duties, and regulatory authority from the Department of Social and Rehabilitation Services to the Division of Health Policy and Finance (DHPF) within the Department of Administration, and then transferred those powers, duties and regulatory authority to the Kansas Health Policy Authority (KHPA), effective July 1, 2006. Executive Reorganization Order (ERO) #38 has transferred these powers, duties, and regulatory authority to the Kansas Department of Health and Environment, Division of Health Care Finance. The ERO provides that KDHE will be the single state agency for Kansas Medicaid effective July 1, 2011. Telephone conference is not available.

This 30-day notice of the public hearing shall constitute a public comment period for the proposed regulation as stated in K.S.A. 2007 Supp. 77-421(a)(3). All interested parties may submit written comments before the hearing to Bobbie Graff-Hendrixson, KDHE, Division of Health Care Finance, Landon State Office Building, 900 S.W. Jackson, Room 900-N, Topeka, Kansas 66612-1220, or by e-mail at Bgraff-hendrixson@kdheks.gov At the hearing, the Division of Health Care Finance will give all interested parties a reasonable opportunity to present their views, but it may be necessary to request each participant to limit any oral presentation to five minutes. You may obtain a copy of the regulation and the economic impact statement by

contacting Bobbie Graff-Hendrixson at (785) 296-4109 or the DHCF Website at www.kdheks.gov.

Any individual with a disability may request accommodation in order to participate in the public hearing and may request the proposed regulation and economic impact statement in an accessible format. Please make any request for accommodation to participate in the hearing at least five working days before the hearing by contacting Bobbie Graff-Hendrixson at (785) 296-4109 or by calling the Kansas Relay Center at 1-800-766-3777.

A summary of the regulation and the economic impact follows:

Article 5.–PROVIDER PARTICIPATION, SCOPE OF SERVICES, AND REIMBURSEMENT FOR THE MEDICAID (MEDICAL ASSISTANCE) PROGRAM

129-5-1. Prior Authorization. The following changes will be made to regulation 129-5-1 regarding prior authorization of pharmaceutical products:

These therapeutic classes of drugs have been evaluated by the Preferred Drug List Advisory Committee and found to be clinically equivalent to agents within their respective drug classes. To ensure the most clinically appropriate utilization of these drugs in the most cost-effective manner, the following drugs will require prior authorization:

- Adjunct antiepileptic drugs: eslicarbazepine, perampanel, ezogabine, oxcarbazepine
- Triptans: rizatriptan, sumatriptan pens, vials, cartridges, and nasal sprays
- Inhaled long-acting beta2-agonsists & corticosteroids: budesonide & formoterol, fluticasone & vilanterol
- Miscellaneous anti-lipemic agents: lomitapide, mipomersen
- Dipeptidyl peptidase IV inhibitors: alogliptin, linagliptin
- Antimuscarinics & Antispasmodics: aclidinium bromide

The following drugs will require prior authorization to ensure appropriate utilization because of safety issues, potential for off-label use, abuse potential, cost effectiveness, and/or clinical appropriateness:

- Antibiotics: rifaximin
- Antiemetics: doxylamine succinate & pyridoxine hydrochloride
- Antirheumatics: tofacitinib
- Cervical Dystonia agents: incobotulinum toxin A
- Drugs for the treatment of obesity: lorcaserin, phentermine & topiramate ER
- Complement inhibitors: eculizumab
- Anti-hepatitis C virus agents: simprevir, sofosbuvir
- Topical acne agents: adapalene, adapalene & benzyl peroxide, azelaic acid, dapsone, tazarotene, tretinoin & clindamycin
- Interferons: interferon alfacon-1, interferon alfa-2b, interferon beta-1a, interferon beta-1b, peginterferon alfa-2a, peginterferon alfa-2b
- Pulmonary arterial hypertension agents: ambrisentan, bosentan, epoprostenol, ilprost, macitentan, riociguat, sildenafil, tadalafil, treprostinil
- Testosterone agents: Androderm Transdermal®, AndroGel®, Axiron Topical Solution®, Delatestryl®, Fortesta Gel®, Striant Buccal®, Testim Gel®, Testopel Pellets®
- Antineoplastic agents: afatinib, dabrafenib, everolimus, methotrexate, sipuleucel-T, trametinib, trastuzumab
- Multiple Sclerosis agents: dalfampridine, dimethyl fumarate, fingolimod, glatiramer, teriflunomide
- Immunosuppressive agents: belimumab
- Ammonia detoxicants: glycerol phenylbutyrate, sodium phenylbutyrate
- Heavy metal antagonists: deferasirox, deferiprone, trientine
- Pituitary corticotropin: H.P. Acthar Gel®
- Ocular agents: ocriplasmin, ranibizumab
- Miscellaneous analgesics: ziconotide intrathecal infusion
- Miscellaneous central nervous system agents: riluzole

- Calcimimetics: cinacalcet
- Radioactive agents: radium Ra 223 dichloride

Federal Mandate: This regulation change is not federally mandated.

Economic Impact: It is expected that these changes will reduce Medicaid expenditures by $1,160,948.58 SGF and $1,533,292.74 FFP annually.

Bearer of Cost: The cost of reviewing Prior Authorization will be borne by DHCF. If a Medicaid consumer wishes to have a drug despite a PA denial the cost will be borne by the consumer.

Affected Parties: Medicaid consumers, pharmacists, prescribers, and the Medicaid agency.

Other Methods: There were no other appropriate methods for the desired outcome.

Kari Bruffett, Director
KDHE; Division of Health Care Finance